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	LDSQ-2221A (Rev. 09/2016) FRONT		REPORT DA		ASE ID	CALL I			-
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	OFFICE OF CHILDREN AND FAMILY SERVICES REPORT OF SUSPECTED	112111	The second law of the second		3 2	-1 /6	190	28	
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	CHILD ABUSE OR MALTREATMENT		3:45	IM PM					
~	SUBJECTS (	OF REPO	RT .						
,	List all children in household, adults responsible and alleged subjects.  Line # Last name Allases	Sex	Birthday or Age	Race	Ethnicity		Relation	Role	Lang
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	Child's drug/alcohol use Other (spec	-	•	_	-				
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1	State reasons for suspicion, including the nature and extent of each child's injurnative atment, past and present, and any evidence or suspicions of "Parental"	iries, abus		(If kno	own, give time/d	ate of a	lleged in	cident	)
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#### 9/27/18

-Recently Mr. Valva has reached out to the teachers and myself to discuss Thomas and Anthony. According to Mr. Valva and Angela the boys have been having many accidents over the last year, defecating and urinating throughout the day and night to the point Thomas and Anthony need to wear pull ups to school. Thomas had an accident on the bus yesterday and I chose to speak with him because in previous years Thomas never had a toileting issue in school nor did he wear pull ups. Thomas has had a total of 3 accidents in school this year.

During my discussion with Thomas he shared that in order to receive food he must ask for food and in order to use the bathroom he must ask to use the bathroom. According to Thomas the only time he is able to use the bathroom without asking is first thing in the morning. Thomas said he needs to wear pull-ups because he is a baby. Again Thomas never whore pull-ups last year and if he had any accidents they were very much infrequent.

During our meeting Thomas was asking for food repeating that he is very hungry. I asked Thomas if he ate breakfast and he said yes. We began to talk about meals at home and evening routine. Thomas said he is home alone with his two older sisters Delana (10years old) and Milana (10yrs old). I asked Thomas how long he is home with them and he said for a long time. I made reference to his favorite T.V. show Titan's and Thomas said he is home alone with his sisters longer than Titan's and that they are able to watch multiple shows before Angela or Dad come home. I asked if it is still day time when Angela or Dad come home and Thomas said no it is dark out.

#### Other concerns:

- -Anthony has lost 20lbs in 1 year. He weighed 72lbs in August 2017 and now weighs 52lbs. Mr. Valva reports the weight lost is due to increased activity. If this is true then Anthony should have increased stamina for physical activity, muscle development. Anthony and Thomas are very thin and always hungry. Anthony has become more socially withdrawn and has a decrease in his language skills since last school year. -Mr. Valva does not seem to understand how Thomas and Anthony's disabilities will impact the production of their speech or how anxiety can impair.
- -Anthony and Thomas are diagnosed with autism, Anthony is more impaired.

  -The biological mother has reached out to me with a great deal of information that she should be giving to an attorney. She is desperate to have custody of her boys returned to her and feels that Mr. Valva is abusing his power as a police officer to manipulate people and the system.
- I have told Mr. Valva numerous times to speak in great detail with the family pediatrician regarding both Anthony and Thomas weight and incontinence.
  -There is currently an open CPS case and Jessica Alanza is the current case worker (631)852-3678.

LDSS-2221A (Rev. 09/2016) ATTACHMENT

## STAPLE TO LDSS-2221A (IF NEEDED)

# REPORT OF SUSPECTED CHILD ABUSE OR MALTREATMENT

PORT DATE	CASE ID	CALL ID	1					
TIME AM	LOCAL CASE #	LOCAL DIST/AGENCY						
PERSON MAKING THIS REPORT:								
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LDSS-2221A (Rev. 09/2016) FRONT		REPORT DATE CASE ID CALL ID							
NEW YORK OFFICE OF CHILDREN AN	–		1/16/19			32354	875		
REPORT OF SU				- 1	DCAL CASE #	LOCAL	DIST./AG	ENCY	
CHILD ABUSE OR M	ALTREATMENT		2 :29	⊠ PM					
	SUBJECTS	OF REPO							,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
List all children in household, adults responsible and a Line # Last name First n		Sex (m, f, unk)	Birthday or Age mo/day/yr	Race code	Ethnicity (Ck only if hispar		Relation code	Role	Lang. code
1. Valva Michael		m	~40	WH			PA	AS	EN
2. Pollina Angela		f	~40	WH		****	P\$	AS	EN
3. lt M		f	/08	WH			СН	UK	EN
4. l: D		f	/08	WH			CH	UK	EN
5. Valva Anthony		m	/09	WH			СН	UK	EN
6. Valva Thomas		m	<sub>-</sub> /11	WH			CH	AB	EN
7. Valva Andrew		m	<i>i</i> /13	WH			СН	UK	EN
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	BASIS OF S	USPICIO	18						
Alleged suspicions of abuse or maltreatment.	Give child(ren)'s line number(s	). If all chil	dren, write "A	ALL".					
DOA/fatality	Poisoning	g/noxlous s	ubstances	_	Swellin	ng/disloc	ation/sp	rains	
Fractures	Choking/	twisting/sh	aking	_	Educat	tional ne	glect		
Internal Injuries (e.g., subdural hemato	oma) Lack of m	edical car	•	_	Emotio	nal neg	lect		
£ Lacerations/brulses/welts	Malnutriti	on/failure t	o thrive	_	Inadeq	equate food/clothing/shelter			
Burns/scalding	Sexual at	ouse		_	Lack o	f superv	Islon		
Excessive corporal punishment	Inadequa	te guardia	nship .	_	Abando	onment			
Child's drug/alcohol use	Other (sp	ecify)	Parent's drug/alcohol misuse						
State reasons for suspicion, including the natu maltreatment, past and present, and any evide	re and extent of each child's in	ijuries, abu		(lf kr D 1	nown, give time	/date of	alleged	Inciden	t)
contributing to the problem. Please see attache		DOITAVIOI		Y 15					
				R 2019					
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Edward Schneyer		le Roman	0				878016		
523 Montauk Hwy, East Moriches, NY 119	940 523 Mo	ontauk Hy	vy, East Mo	riches,	NY 11940				
AGENCY/INSTITUTION AGENCY/INSTITUTION East Moriches Elementary School East Moriches Elementary School									
RELATIONSHIP									
Med. exam/coroner Physician Hosp. staff Law enforcement Neighbor Relative Instit, staff									
Social services Public Mental health X School staff Other (specify)									
For use by Physicians MEDICAL DIAGNOSIS ON CH	ILO SIGNATURE OF	PHYSICIA	WHO EXAMI	NED/TRE	ATED CHILD (	AREA C	ODE) TEL	EPHON	IE NO.
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221A (Rev. 09/2016) ATTACHMENT

## STAPLE TO LDSS-2221A (IF NEEDED)

# REPORT OF SUSPECTED CHILD ABUSE OR MALTREATMENT

(Use only if the space on the LDSS-2221A under "Reasons for Suspicion" is not enough to accommodate your information)

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REPORT DATE			CASE ID	CALL ID	
	1/16/20	19		32354875	1
	TIME	□ AM	LOCAL CASE #	LOCAL DIST/AGENCY	
	2:29	⊠ PM			

PERSON MAKING

Edward Schnever

THIS REPORT:	
Print clearly if filling out hard copy.	
Continued: State reasons for suspicion, including the nature and extent of each child's injuries, abuse or maltreatment, past and present, and any evidence or suspicions of "Parental" behavior contributing to the problem.  Thomas came into school with a suspicious bruise on swollen right eye that was not there the afternoon of the day before. Child gave conflicting stories of when and how the injury occurred. First stated that he fell in gym yesterday, however the class did not have gym yet this week. He then stated that he did not know but that he may have fell on Saturday. Later he stated that he thinks it occurred in the kitchen on Tuesday. Dad was made aware of the bruise and stated that he noticed it this morning and the child told him that he fell at recess the day before. Suspicious injury due to conflicting explanations and previous case regarding abuse.  Also noted, older brother Anthony began screaming in class today when asked to see the nurse for a stye that was bothering him, stating that he has been told that he is not allowed to go to the nurse. Father was also made aware, and assured that he is allowed to go to the nurse.	(If known, give time/date of alleged incident) MO 1 DAY 15 YR 2019 Time : □ AM ⊠ PM
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LDSS-2221A (Rev. 09/2016) FRONT

NEW YORK STATE

OFFICE OF CHILDREN AND FAMILY SERVICES

REPORT OF SUSPECTED

REPORT DATE 2/27/19	CASE ID	CALL ID 32423682
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REPORT OF SUSPECTED							OCAL CASE #	LOCAL	DIST./AG	ENCY	
CHI	LD ABUSE OR M	ALTREATMEN	T		3:19	□ PM		,			
		SUB	JECTS O	F REPO	RT						
List all children in house Line # Last name	hold, adults responsible and a First n		Aliases	Sex (m, f, unk)	Birthday or Age mo/day/yr	Race	Ethnicity (Ck only if hispani	ic/latino)	Relation code	Role code	Lang, code
1. Valva	Michael			m	~40	WH			PA	AS	EN
2. Pollina	Angela			f	~40	WH			P\$	AS	EN
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4. I	D.			f	/08	WH			СН	UK	EN
5. Valva	Anthony			m	09	WH			СН	MA	EN
6. Valva	Thomas			m	11	WH			CH	UK	EN
7. Valva	Andrew	W-174		m	/13	WH			CH	UK	EN
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Alleged suspicions of	f abuse or maltreatment. (	Give child(ren)'s line n	umber(s).	If all chi	ldren, write "	ALL".					
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Fractures			Choking/tv	wisting/sh	naking		Educat	tional n	eglect		
Internal inju	uries (e.g., subdural hemat	oma) L	ack of me	edical car	ө	2	Emotio	nal neg	lect		
Lacerations	s/brulses/welts	<u>5</u> N	/lalnutritio	n/fallure t	to thrive	-	Inadeq	uate fo	od/clothir	ng/shelt	er
Burns/scale	ding	S	Sexual abuse Lack of supervision								
Excessive	corporal punishment	Ir	Inadequate guardianship Abandonment								
Child's dru	g/alcohol use		Other (spe	other (specify) Parent's drug/alcohol misuse							
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State reasons for simaltreatment, past contributing to the past	uspicion, Including the natu and present, and any evide problem.	ire and extent of each ence or suspicions of "	child's inJ Parental"	uries, abi behavlor	, М D	(IT KI O 2 AY 27 R 19	nown, give time				t)
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	, East Moriches NY 119	940		ntauk H	wy, East Mo	riches	NY 11940				
AGENCY/INSTITUTION East Moriches Ele	ementary School			oriches l	N Elementary	School					
RELATIONSHIP											
Med. exam/co		Hosp. staff	Law	/ enforce:		Neighbo (specify		'e	Instit.	staff	
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LDSS-2221A (Rev. 09/2016) ATTACHMENT

STAPLE TO LDSS-2221A (IF NEEDED)

### REPORT OF SUSPECTED **CHILD ABUSE OR MALTREATMENT**

(Use only if the space on the LDSS-2221A under "Reasons for Suspicion" is not enough to accommodate your information)

REPORT DATE	CASE ID	CALL ID
2.27/19		32423682
TIME □ AM 3:19 □ PM	LOCAL CASE #	LOCAL DIST/AGENCY

PERSON MAKING

THIS REPORT: Jenna Holborow / Edward Schneyer	Win-
Print clearly if filling out hard copy.	
Continued: State reasons for suspicion, including the nature and extent of each child's injuries, abuse or maltreatment, past and present, and any evidence or suspicions of "Parental" behavior contributing to the problem.	(If known, give time/date of alleged Incident) MO 2 DAY 27 YR 2019
On 2/7/19 parent was called with the weight loss concerns for Anthony. Since January 2019, they have also received emails from the school regarding not having enough food for snack, his change in emotional behavior, and how he visually appears to be losing weight. Nurse completed a weight check, and that the doctor's office confirmed that his weight (57lbs) was considered underweight. Parents encouraged to schedule doctor appointment.	Time : □ AM □ PM
On 2/8/19 Anthony came to school late because he had an accident at home.	
On 2/25/19 Anthony arrived at school with a wet jacket and backpack that smelled of urine.	
On 2/27/19 Anthony arrived at school wet pants socks and shoes with the smell of urine. Bus driver stated there was no urine on the bus after exiting in the morning. Child shaking and indicated having to stay in the garage for unknown amount of time.	